PATENT APPLICATION FEE DETERMINATION RECO									- 1	Application or Docket Number				
Effective October 1, 2003										10	79	030)	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE				OTHER THAN OR SMALL ENTITY		
[OTAL CLAIM	S	12			R/	RATE		٦ ٔ	RATE	FEE			
F	OR		NUMBE	NUMBER FILED		NUMBER EXTRA		BAS	C FEI	385.00	OR	BASIC FE		
T	OTAL CHARGE	ABLE CLAIMS	12 "	17_ minus 20=		•		X\$ 9=		1	OR	X\$18=	<u> </u>	
IN	DEPENDENT (CLAIMS	minus 3 =		•	· - ·		X43=		 	-	Yas	 	
м	ULTIPLE DEPE	NDENT CLAIM	PRESENT							OR	1 200-	 		
- 1	* If the difference in column 1 is less than zero, enter "0" in column 2									ļ	OR	+290=		
CLAIMS AS AMENDED - PART II									TAL		JOR	TOTAL	770	
_	(Column 1) (Column 2) (Column 3)								ALL	ENTITY	OR	OTHER SMALL	R THAN ENTITY	
AMENDMENT A	11/15/4	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESE		RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ENDI	Total	.20	Minus	-2	<u></u>		<u>.</u>	X\$	9=		OR	X\$18=		
AM	FIRST PRESENTATION OF ML		Minus	PENIDENT	C1 0114	1=		X43	}=		OR	X86=		
_	THE DEPENDENT CLAIM							+14	5=		OR	+290=		
									TAL	-		TOTAL		
		(Column 1)	·	(Colum	n 2)	(Colum	n 3)	ADDIT.	rtt i		. ,	ADDIT. FEE	· ·	
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ER JSLY	PRESE	NT	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=		X\$ 9) =		OR	X\$18=		
	Independent	NTATION OF M	Minus	051105117		<u> -</u>	_	X43	- 1		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								=		OR	+290=		
<i>\\</i>								TO ADDIT. F	TAL		OR A	TOTAL DDIT, FEE		
(Column 1) (Column 2) (Column 3)													·	
AMENDMENIC		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESEN EXTRA		RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	
֓֞֝֞֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֡֓֓֓֡֓֓֓֡֓	Total	•	Minus	**]	=	_] [X\$ 9:			OR	X\$18=		
Ž -	Independent	•	Minus	***		=	_]	X43=	1			X86=		
_1	PIHȘI PRESE	NTATION OF MU	LTIPLE DEF	PENDENT C	LAIM		╜┟		╬		OR	700°		
• H	the entry in colum	. [+145=	L		OR L	+290=							
andl 12 li	the Highest Nur	nber Previously Pai Nber Previously Pai	d For IN THIS d For IN THI	S SPACE is to S SPACE is to	es than	20, enter		DDIT. FI	EL			DOTAL DOTT. FEE		
_		ber Previously Paid	TO (IOURION	inuependent	is the l	nignest hui	mber four	nd in the	appro	priate box	in colur	nn 1.		
RM	PTO-875 (Rev. 10)	03)					Pate	nt and Tra	demai	k Office, U.S	. DEPAF	RTIMENT OF (OMMERCE .	